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## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TE:L: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII STATE ETHICS COMMISSIO

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PARTI LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
0 4 111			
Saunders, III	Harry	Α.	(808) 548-4811
MAILING ADDRESS (Street)			FAX
P. O. Box 898900			(808) 548-2975
(City)	(State)	(Zip	Code)
Mililani,	Hawaii	96	3789
EMPLOYING ORGANIZATION (FI	ill in only if you are employed by a busine	ess entity which has been retained to lobby)	TELEPHONE
N/A			
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip	Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE WAIKOLOA, LLC		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900		(808) 548-2975
(City)	(State)	(Zip Code)
Mililani,	Hawaii	96789
NAME OF PERSON RESPONSIBLE FO	OR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Harry A. Saunders, III		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900		(808) 548-2975
(City)	(State)	(Zip Code)
Mililani,	Hawaii	96789

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PART III DESCRIPTION OF	<u>F SUBJECTS UPON WHICH Y</u>	OU EXPECT TO LOBBY	
Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

I hereby pertify that the information furnished above is, to the best of my knowledge, correct and complete.

**CERTIFICATION OF LOBBYIST** 

		January 8, 2007		
(Signature of Lobbyist)		(Date)		
PART V AUTHORIZATION	TO LOBBY			
NAME	TITLE OF	AUTHORIZING OFFICER OR PERSON REPRESENTED		
Richard K. Mirikitani	Senior Vid	Senior Vice President & Secretary		
NAME OF ORGANIZATION (if applic	able)	TELEPHONE		
CASTLE & COOKE WAIKOLOA		(808) 548-4811		
MAILING ADDRESS (Street)		FAX		
P. O. BOX 898900		(808) 548-2975		
(City)	(State)	(Zip Code)		
Mililani,	Hawaii	96789-8900		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.				
Mohor		January 8, 2007		
(Signature of Authorizing Officer or Person Represented)		(Date)		